

Specific Use Permit

City of Euless
201 N. Ector Drive
Euless, Texas
817-685-1684

PART 1. APPLICANT INFORMATION

BUSINESS OWNER (Legal Entity): Julio C. Mazariego dba _____
Official Address to send all City correspondence: 820 Wilshire Dr. Suite B
City: Euless State: Texas Zip: 76040
Applicant/Agent Name: Julio Mazariego
Mailing Address: 820 Wilshire Dr. Suite: B
City: Euless State: Tx Zip: 76040
Telephone (817) 874-1197 Fax () _____ Email: escriitorstakechos23@gmail.com
PROPERTY OWNER (Please print): Shamim A. Chowdhury
Signature: _____
Mailing Address: 2200 Yeargain Ct., S Suite: _____
City: Southlake State: Tx Zip: 76092
Telephone () _____ Fax () _____ Email: _____

PART 2. PURPOSE OF PROPOSAL

In what ways have conditions changed substantially since the current zoning was set for this property?

I am not asking to change the zoning.

How would the proposed amendment promote the public welfare and encourage orderly city development?

Leave space for public Assembly

PART 3. PROPERTY DESCRIPTION

Street Address of Property (if available): 820 Wilshire Dr. Suite B, Euless, Tx 76040
LEGAL DESCRIPTION: Subdivision Name _____ Block(s) _____ Lot(s) _____
Survey Name(s): _____ Abstract No(s): _____ Tract(s): _____

PART 4. PRESENT USE OF PROPERTY (CIRCLE ONE)

VACANT LAND VACANT BUILDING SINGLE FAMILY DWELLING **COMMERCIAL**
MULTI-FAMILY DWELLINGS INDUSTRIAL OTHER: _____

PART 5. ACKNOWLEDGMENTS

I certify that the above information is correct and complete to the best of my knowledge and ability and that I will be fully prepared to present the above proposal at a Planning and Zoning Commission public hearing. I reserve the right to withdraw this proposal at any time by filing a written request with the Department of Planning and Development. I understand that 50% of my application fee will be refunded if my written request for withdrawal is received by the Department within 24 hours after the Planning and Zoning Commission public hearing.

Applicant, Owner or Authorized Agent: [Signature] Date 2-26-16

OFFICE USE ONLY:

Case Number: 11-01-SUP Zoning Fee: 250.00 Date Submitted: 3-15-16

Accepted By: [Signature] Current Zoning: TX-10 Expiration Date: _____

The Development Services Group WILL NOT REVIEW any drawings that are missing any applicable check list items. Please mark all that apply and submit signed list with the application. Application will not be accepted unless this list is submitted.